

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	INDUSTRIAL TOMOATO PROCESS AND PRODUCT OBTAINED THEREOF
Attorney Docket Number::	ZELKHA6
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Morris

Middle Name::
Family Name:: ZELKHA
Name Suffix::
City of Residence:: Omer
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 10 Hadar Street
City of Mailing Address:: Omer
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 84965
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Dov
Middle Name::
Family Name:: HARTAL
Name Suffix::
City of Residence:: Tel-Aviv
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 6 Ugarit Street, Tel Baruch
City of Mailing Address:: Tel-Aviv
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 69016
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Zvi
Middle Name::
Family Name:: ALBERT
Name Suffix::

City of Residence:: Kiryat Bialik
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 14 Keren Kayemet Street
City of Mailing Address:: Kiryat Bialik
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 27093

Correspondence Information

Correspondence Customer Number:: 001444

Representative Information

Representative Customer Number:: 001444

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This Application	National Stage of	PCT/IL03/000678	08-17-03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Israel	151342	08-19-02	Yes

Assignment Information

Assignee Name:: Lycored Natural Products Industries Ltd.
Street of Mailing Address:: P.O. Box 320
City of Mailing Address:: Beer Sheva
State or Province of Mailing Address::
Country of Mailing Address:: Israel
Postal or Zip Code of Mailing Address:: 84102